WHAT YOU NEED TO KNOW ABOUT CAMPUS SEXUAL ASSAULT VICTIMIZATION

What is sexual assault victimization?

- Sexual assault victimization occurs when a person has sexual contact with another person when she/he did not want the contact or could not consent. Contact can range from touching to intercourse.
- State-of-the-art surveys ask individuals how frequently they have experienced different forms of unwanted sexual contact compelled by verbal coercion, threats of force, force, or have been taken advantage of when unable to provide consent.
- Results are reported as the percentage who disclose any form of non-consensual sexual contact, as well as the percentage of who experience specific types of sexual assault by each individual tactic, such as forcible rape or alcohol- or drug-incapacitated rape.
- These methods allow for estimates that fit criminal codes, Title IX definitions, and Centers for Disease Control and Prevention definitions of sexual violence.

How common is campus sexual assault victimization?

- Campus sexual assault is much more common than many people imagine.
- Estimates of sexual assaults of college women have been remarkably consistent over time beginning with the first national survey (Koss et al., 1987), and continuing with subsequent national surveys (Fisher et al., 1998; Kilpatrick et al., 2007; Lawyer et al., 2010).
- These surveys regularly show that approximately 15 to 20 percent of college women report experiencing rape or attempted rape during their college career, and that over 50 percent report experiencing some form of unwanted sexual contact. Variation in percentages depends on whether non-forcible sexual assaults are included that occurred when the victim was incapacitated and unable to consent and on whether recall includes high school as well as college.
- Although many studies do not have diverse samples, high rates of victimization are found among women who are members of sexual and ethnic minorities (Abbey et al., 2010); men too can be victims of sexual assault, most often by other men, and at lower rates than women (Walters, et al, 2013).
- Sexual assault victimization occurs at somewhat higher rates for women who are not in college (8 per 1000) compared to students (6.1 per 1000) based on Department of Justice’s National Crime Victimization Survey data from 1995 to 2011 (Rennison, 2014).
  - However, these data must be interpreted cautiously because of how sexual victimization was measured; the survey has been severely criticized by the National Research Council (Groves, et al., 2008; Kruttschnitt, et al., 2014).
What are some of the consequences of sexual assault for victims?

- Mental health problems such as anxiety, depression, PTSD, substance abuse, suicidality, eating problems, and lower self-esteem are common (Campbell et al., 2009).
- Physical health problems may include headaches, gastrointestinal problems, sleep disturbances and gynecological and reproductive health problems (see Brener et al., 1999; Martin et al. 2011; Sabina & Ho, 2014; Turchik & Hassija, 2013).
- Alcohol is present in one-half to two-thirds of college sexual assaults, and sexual assault victimization also predicts problem drinking in college women (Abbey, 2002; Parks et al., 2014).
- Sexual assault undermines victims’ perceptions of the academic climate, such as being seen as a serious student, being treated fairly, and feeling safe on campus (Cortina, et al., 1998).
- Academic performance may be impaired, including significant declines in academic achievement, impaired ability to carry a normal course load, increased frequency of missing classes, reduced capacity to contribute to the campus community, and increased likelihood of dropping courses, leaving school, or transferring (AAUP, 2012; Jordan, et al., 2014; van Roosmalen & McDaniel, 1998).

What are some of the consequences of sexual assault for institutions of higher education?

- Students and their parents may perceive the institution as unsafe and an inhospitable learning environment (AAUP, 2012).
- University officials who deny or diminish the problem reflect negatively on campus leaders’ commitment to end campus violence, create distrust among parents and alumni, and damage an institution’s standing in the community (Krakauer, 2015).
- Students incur increased costs: The cost of sexual assault for students of a single national graduating class was estimated to be at nearly $2 billion (Brodsky, 2014).

Do most victims report their sexual assault experiences?

- College women rarely report rape to the police, with studies finding rates from 0 percent for sexual coercion and date rape (Edwards, et al., 2012), to about 13 percent for forced sexual assault (Krebs, et al., 2009).
- In contrast, approximately 40% of victims disclose their assault to family and/or friends.

Why are rates of reporting so low?

- Understandings of what constitutes rape often do not align with legal definitions. Widely accepted stereotypes characterize “legitimate” rapes as those that involve strangers and are violent.
  - Actually these incidents constitute a small fraction of rapes, especially those of students. When experiences don’t match common beliefs about what rape is, students are unlikely to report (Littleton, et al., 2007; Paul & Gray, 2011), although negative physical and mental health consequences still occur (McMullin & White, 2006).
- Students are especially unlikely to label their unwanted sexual experience as rape when they were attacked by people they knew and/or in alcohol-related situations (Kilpatrick et al., 2007; Orchowski & Gidycz, 2012). Without acknowledging that a rape or other form of sexual assault has occurred, students will not report it.
• Victims fear that reporting rape will be humiliating, worry that it may result in their being ostracized and retaliated against (Kilpatrick et al., 2007; Zinzow & Thompson, 2011), and fear that the investigation would be confusing, invasive, re-traumatizing, and futile (Fisher et al., 2003).
• When victims receive controlling and infantilizing reactions from others, such responses undermine their perceptions of control over their own recovery and are related to increased PTSD symptoms (Orchowski, et al., 2013; Peter-Hagene & Ullman, 2014).
• Higher education institutional response has the potential to re-traumatize victims (Smith & Freyd, 2014).
• Minority women are less likely to report (Wolitzky-Taylor et al., 2011).

Approaches to Prevention, Deterrence, and Resistance
• Prevention must focus on perpetrators’ behavior, but until prevention occurs, there is a need to reduce women’s risk of being assaulted.
  ▪ Advice about how to avoid becoming a victim may reduce the likelihood of an individual woman being sexually assaulted, but it does nothing to deter perpetrators.
• Prevention aimed at women should recognize their sexual independence as well as inform them on how to resist rape in a culture that tolerates rape (Rozee, 2011).
• As long as perpetration continues, and until it can be prevented, we need to provide accurate information to women about how to protect themselves, including that forceful verbal and physical resistance have been shown to reduce the odds of rape completion, without increasing other physical injuries (Ullman, 2007).
• Self-defense training that prepares women to recognize and resist acquaintance rape situations helps reduce the risk of sexual assault victimization (Gidycz & Dardis, 2014; Hollander, 2014; Senn, et al, 2015).
• Emerging approaches call for expanding the focus from individual and peer levels risk factors to environmental level risk factors, such as policy changes related to alcohol usage and party governance.
• Intervention effectiveness and efficiency could be enhanced if key players in prevention, such as student health promotion, residence life, campus safety, student conduct, and Greek Life, worked together. It is also necessary to concurrently address related campus health risks such as physical aggression, dating violence, and high-risk drinking (DeGue et al., 2012; Lippy & DeGue, 2014).
References


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